NOV 2 8 2003

510(k) Summary for the

MALIS™ Irrigation Module 1000 K033499

Valley Forge Scientific Corp. 136 Green Tree Rd., Suite 100, P.O. Box 1179 Oaks. PA. 19456

Contact Person:

Jerry L. Malis, President

Phone Number: 610-666-7500 Fax Number: 610-666-7565

Date Prepared:

10/30/03

Proprietary Name:

MALISTM Irrigation Module 1000

Common Name: Classification Name: Irrigation Device for Bipolar Coagulation and Cutting Electrosurgical Cutting and Coagulation Accessory

Device Classification:

This device is Class II per Class II per 21 CFR § 878.4400 –

Electrosurgical Cutting and Coagulation Device and

Accessories

Predicate Device:

MALISTM Irrigation System (K854413)

Intended Use:

The MALIS™ Irrigation Module 1000 is indicated for use with

irrigating bipolar forceps with the CODMAN® / MALISTM

generators.

Device Description:

The MALIS™ Irrigation Module 1000 is an irrigation control

system for use with the MALISTM CMC-III Bipolar

Electrosurgical Systems and the Synergy MALISTM Precision System. This system provides controlled flow of irrigating fluid

across the tips of bipolar irrigating forceps.

Performance Data:

Verification and validation tests were conducted on the on both the system and its software. Electrical safety testing was also

conducted. All testing passed.

Substantial Equivalence:

The modified system, the MALISTM Irrigation Module 1000, is substantially equivalent to the predicate MALISTM Irrigation System (K854413) in terms of intended use, function, technical specifications, and operating principles. The safety and efficacy

of the MALISTM Irrigation Module 1000 is therefore

substantiated by its similarity to the original device, MALISTM

Irrigation System (K854413).





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Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Jerry L. Malis President Valley Forge Scientific Corporation 136 Green Tree Road, Suite 100 P.O. Box 1179 Oaks, Pennsylvania 19456

Re: K033499

Trade/Device Name: MALIS™ Irrigation Module 1000

Regulation Number: 21 CFR 878.4400

Regulation Name: Electrosurgical cutting and coagulation device and accessories

Regulatory Class: II Product Code: GEI

Dated: November 3, 2003 Received: November 6, 2003

Dear Mr. Malis:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4659. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

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Enclosure

510(k) Number (if known): <u>K 0 3 3 4 9 9</u>
Device Name
MALIS™ Irrigation Module 1000
Indications for Use The MALIS™ Irrigation Module 1000 is indicated for use with irrigating bipolar forceps with the CODMAN® / MALIS™ generators.
(Please do not write below this line - continue on another page if needed)
Concurrence of CDRH, Office of Device Evaluation (ODE)
Prescription Use: OR Over-The-Counter Use: (Per 21 CFR 801.109)
Division Sign-Off) Division of General, Restorative Neurological Devices Number